



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**INDEPENDENT/POLITICAL
COMMITTEE COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed
by the treasurer or designated record keeper

3. This Statement covers From: 08/01/07 To 10/20/07

1. Committee I.D. Number

137802

2. Committee Name

Macomb Business United

4. Committee's Mailing Address

**32068 Margaret Court
Warren, MI 48093**

Area Code and Phone (586) 413-6868

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

5. Treasurer's Name and Residential Address

**Gust Ghanam
32068 Margaret Court
Warren, MI 48093**

Area Code and Phone (586) 413-6868

6. Treasurer's Business Address

N/A

Area Code and Phone

7. Designated Record Keeper's Name and Mailing Address (If the committee has a Designated Record Keeper)

**Gust Ghanam
32068 Margaret Court
Warren, MI 48093**

Area Code and Phone (586) 413-6868

8. TYPE OF STATEMENT:

APPLICABLE TO INDEPENDENT AND POLITICAL
COMMITTEES REGISTERED ON STATE LEVEL

8a. TRIANNUAL STATEMENTS

Even Year

Odd Year

☐ April 25

☐ January 31

☐ July 25

☐ July 25

☐ October 25

☐ October 25

8b. QUARTERLY STATEMENTS

CAUCUS COMMITTEES (ONLY)

☐ January 31

☐ April 25

☐ July 25

☐ October 25

8c ☐ SPECIAL ELECTION INDEPENDENT
EXPENDITURE REPORT

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON COUNTY LEVEL

8d. ☐ ANNUAL STATEMENT
(_____ Coverage Year)

8e. ☒ PRE-ELECTION OR

8f. ☐ POST-ELECTION

Pre-Election or Post-Election
Statement relates to:

☐ PRIMARY

☒ GENERAL

☐ CONVENTION

☐ SCHOOL

☐ SPECIAL

☐ CAUCUS

Date of Election, Convention or Caucus:

11/06/07

APPLICABLE TO INDEPENDENT AND
POLITICAL COMMITTEES REGISTERED
ON

STATE AND COUNTY LEVEL

8g. ☐ AMENDMENT TO CAMPAIGN
STATEMENT

(Complete Item 8a, 8b, 8c 8d, 8e, 8f or 8h
to indicate which Statement is being
amended)

8h. ☐ DISSOLUTION OF COMMITTEE

Effective Date of Dissolution

By checking this item, I/We certify that
the committee has no asset or outstanding
debts, including late filing fees. Further, I
request that if the dissolution cannot be
granted, that this be considered a request for
the Reporting Waiver.

Note: The disposition of residual funds must
be reported on Schedule 2B and the
Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6 or 7 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. **If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.**

9. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record Keeper

Type or Print Name

Signature

Date

11/19/07



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

SUMMARY PAGE
INDEPENDENT OR POLITICAL COMMITTEE

RECEIPTS	Column I This Period	Column II Cumulative for Calendar Year
3. Contributions		
a. Itemized Contributions (Schedule 2A, Column 6 + Schedule 2A-2, Column 8)	(3a.) \$ <u>29,500.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$ <u>NOT APPLICABLE</u>	
c. Subtotal of "Contributions"	(3c.) \$ <u>29,500.00</u>	(18.) \$ <u>29,500.00</u>
4. Other Receipts (Schedule 2A-1, Column 6)	(4.) \$ <u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add line 3c + Line 4)	(5.) \$ <u>29,500.00</u>	(20.) \$ <u>29,500.00</u>
IN-KIND CONTRIBUTIONS		
6. In-Kind Contributions		
a. Itemized (Schedule 2-1K, Column 7)	(6a.) \$ <u>0.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ <u>NOT APPLICABLE</u>	
7. TOTAL IN-KIND CONTRIBUTIONS (Add Line 6a + Line 6b)	(7.) \$ <u>0.00</u>	(21.) \$ <u>0.00</u>
EXPENDITURES		
8. Expenditures		
a. Itemized Direct (Schedule 2B, Column 7)	(8a.) \$ <u>17,126.42</u>	
b. Itemized Get-Out-the-Vote (Schedule B-G, Column 6)	(8b.) \$ <u>4,955.42</u>	
c. In-Kind Expenditures- Purchase of Goods or Services (Schedule 2B-2, Column 7)	(8c.) \$ <u>0.00</u>	
d. Unitemized (less than \$50.01 each - no Schedule)	(8d.) \$ <u>0.00</u>	
e. Subtotal of Expenditures	(8e.) \$ <u>22,081.84</u>	(22.) \$ <u>22,081.84</u>
9. Independent Expenditures (Schedule 2B-1, Column 7)	(9.) \$ <u>0.00</u>	(23.) \$ <u>0.00</u>
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) \$ <u>22,081.84</u>	(24.) \$ <u>22,081.84</u>
IN-KIND EXPENDITURES		
11. In-Kind Expenditures- Endorsements, Donations or Loans of Goods or Services (Schedule 2B-2, Column 8)	(11.) \$ <u>0.00</u>	(25.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS		
12. Debts and Obligations		
a. Owed by the Committee (Schedule 2E)	(12a.) \$ <u>0.00</u>	
b. Owed to the Committee (Schedule 2E)	(12b.) \$ <u>0.00</u>	
BALANCE STATEMENT		
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$ <u>0.00</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts - Column I)	(14.) + <u>29,500.00</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = <u>29,500.00</u>	
16. Amount expended during reporting period (Line 10, Total Expenditures - Column I)	(16.) - <u>22,081.84</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$ <u>7,418.16</u>	*

*If your ending balance is negative, please recheck your math.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: <u>Michael Chupa</u> <u>24028 Pointe Drive</u> <u>Macomb, MI 48042</u>		\$ <u>250.00</u>	\$ <u>250.00</u>
4. Date of Receipt <u>09/19/07</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Chupa & Associates</u> Business Address <u>3200 E. 12 Mile Road, Warren, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 2 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: <u>Aroxie Apigian</u> <u>5959 Rosetta</u> <u>Dearborn Heights, MI 48127</u>		\$ <u>300.00</u>	\$ <u>300.00</u>
4. Date of Receipt <u>09/19/07</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Attorney</u> Employer <u>Novara, Tesija & McGuire, PLLC</u> Business Address <u>2000 Town Center, Ste. 2370, Southfield, MI 48075</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 3 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: <u>Joseph Vicari</u> <u>37523 Hidden Valley Court</u> <u>Clinton Twp., MI 48038</u>		\$ <u>150.00</u>	\$ <u>150.00</u>
4. Date of Receipt <u>09/17/07</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Andiamos</u> Business Address <u>5601 Enterprise Drive, Warren, MI 48092</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 4 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: <u>John P. D'Angelo</u> <u>7659 Auburn Road</u> <u>Utica, MI 48317</u>		\$ <u>300.00</u>	\$ <u>300.00</u>
4. Date of Receipt <u>09/05/07</u>			
5. If over \$100.00 cumulative, please provide: Occupation <u>Realtor</u> Employer <u>Pointe Reality</u> Business Address <u>7659 Auburn Road, Utica, MI 48317</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	

Page Subtotal \$1,000.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/15/07

Name & Address:

Jeffrey Schroder
29492 Geraldine
Warren, MI 48093

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Attorney Employer City of Warren

Business Address One City Square, Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/18/07

Name & Address:

Robert Kirk
19500 Hall Road, Ste 100
Clinton Twp., MI 48038

\$ 300.00

\$ 300.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Kirk & Huth, PC

Business Address 19500 Hall Road, Ste. 100, Clinton Twp., MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Robert Huth
13879 Strathmore
Utica, MI 48315

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Kirk & Huth, PC

Business Address 19500 Hall Road, Ste. 100, Clinton Twp., MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Roman Halanski
11245 Masonic
Warren, MI 48093

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation President Employer Van Dyke Sports Center

Business Address 32501 Van Dyke, Warren, MI 48092

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$750.00

Grand Total of All Schedules 2A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/01/07

Name & Address:

Virginia Easley Johnson
4770 Biscayne Blvd.
Miami, FL 33137

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 4770 Biscayne Blvd., Ste. 1000, Miami, FL 33137

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/25/07

Name & Address:

Robert Brummond
210 N. Sappington Rd.
St. Louis, MO 63122

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 1001 Highlands Plaza Drive West, Ste. 400, St. Louis, MO 63110

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/26/07

Name & Address:

Peter B. Langbord
1261 Wynn Road
Pasadena, CA 91107

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 150 South Los Robles Ave., Pasadena, CA 91101

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/01/07

Name & Address:

Thomas J. Lallier
3272 Hamlet Drive
Woodbury, MN 55125

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste. 1200, Minneapolis, MN 55401

Type of Contribution: ☒ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal \$2,000.00

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

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6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

John A. Dolan
2388 Heronwood
Bloomfield Hills, MI 48302

\$ 2500.00

\$ 2500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Attorney Employer York, Dolan, Tomlinson PC

Business Address 42850 Garfield, Ste 101, Clinton Twp., MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Amy Tomlinson
28272 Trillium Place
Harrison Twp., MI 48045

\$ 2500.00

\$ 2500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Homemaker Employer _____

Business Address 28272 Trillium Place, Harrison Twp., MI 48045

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Lisa Dolan
2388 Heronwood
Bloomfield Hills, MI 48302

\$ 2500.00

\$ 2500.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Homemaker Employer _____

Business Address 2388 Heronwood, Bloomfield Hills, MI 48302

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Mike Roland
28130 Groesbeck Hwy.
Roseville, MI 48066

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Owner Employer NBC Truck Equipment

Business Address 28130 Groesbeck Hwy., Roseville, MI 48066

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$7,650.00

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Sherman Rogers
4751 22 Mile Road
Shelby Twp., MI 48317

\$ 450.00

\$ 450.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation President Employer All Waste

Business Address 4751 22 Mile Road, Shelby Twp., MI 48317

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/17/07

Name & Address:

Bradley Fisher
3065 Magnolia Lane
Plymouth, MN 55441

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste 1200, Minneapolis, MN 55401

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/18/07

Name & Address:

Gary D. Sharp
37744 Cherry Hill
Farmington Hills, MI 48331

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 24255 W. 13 Mile Rd., Bingham Farms. MI 48025

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/17/07

Name & Address:

William E. Osantowski
1605 Brandywine Drive
Bloomfield Hills, MI 48304

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 24255 W. 13 Mile Rd., Bingham Farms. MI 48025

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$1,950.00

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS

SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number _____

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6. Amount

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date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Bruce Griffiths
6200 E. 11 Mile Road
Warren, MI 48091

\$ 300.00

\$ 300.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Body by Bruce

Business Address 6200 E. Eleven Mile Road, Warren, MI 48091

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Charles Nagy
1840 Lyster
Troy, MI 48085

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation President Employer Nagy Ready Mix

Business Address 4800 Hixson, Utica, MI 48317

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Linda Olson
24864 Forterra Drive
Warren, MI 48089

\$ 300.00

\$ 300.00

5. If over \$100.00 cumulative, please provide:

Occupation Executive Employer Collision on Wheels

Business Address 24864 Forterra Drive, Warren, MI 48089

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/06/07

Name & Address:

Jack Campo
22001 Hoover
Warren, MI 48089

\$ 750.00

\$ 750.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer Metro Sanitation, LLC

Business Address 22001 Hoover, Warren, MI 48089

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

Page Subtotal

\$1,500.00

Grand Total of All Schedules 2A
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

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6. Amount

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Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/17/07

Name & Address:

Thomas William Pahl
6655 Pinnacle Drive
Eden Prairie, MN 55346

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste 1200, Minneapolis, MN 55401

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Khaless Kizy
6757 Woodside Trail
West Bloomfield, MI 48322

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Wiaters Beverage House

Business Address 12467 E. Eight Mile, Warren, MI 48089

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/17/07

Name & Address:

Robert E. Diehl
4816 Vandervork Ave.
Edina, MN 55436

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste 1200, Minneapolis, MN 55401

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 07/17/07

Name & Address:

Kyle B. Mansfield
122 Elmwood Pl. W
Minneapolis, MN 55419

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste 1200, Minneapolis, MN 55401

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal \$1,300.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/28/07

Name & Address:

Stephen J. Foley
P.O. Box 93
Minnetonak Beach, MN 55361

\$ 500.00

\$ 500.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Foley & Mansfield

Business Address 250 Marquette Ave., Ste 1200, Minneapolis, MN 55401

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 10/08/07

Name & Address:

Centre Court Properties, LLC
19500 Hall Road, Ste 100
Clinton Twp., MI 48038

\$ 4000.00

\$ 4000.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address 19500 Hall Road, Ste. 100, Clinton Twp., MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Gaetano Rizzo
44899 Centre Court, Ste. 101
Clinton Twp., MI 48038

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Builder Employer GTR Builders

Business Address 44899 Centre Court, Ste. 101, Clinton Twp., MI 48038

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Alphonse M. Santino, MD
20952 12 Mile Road
St. Clair Shores, MI 48081

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Doctor Employer Michigan Institute of Urology

Business Address 20952 12 Mile Road, St. Clair Shores, MI 48081

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

\$ 4,800.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS

SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).		6. Amount	7. Cumulative for Calendar Year for Each Contributor (Through date of receipt)
3. Contribution # 1 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Thomas Teasel 79 Cutting Drive Troy, MI 48085		4. Date of Receipt <u>09/19/07</u> \$ <u>300.00</u>	\$ <u>300.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>SJR Pavement Repair</u> Business Address <u>22120 Ryan Road, Warren, MI 48091</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 2 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Karen M. Lowry 29536 Bonnie Warren, MI 48093		4. Date of Receipt <u>09/19/07</u> \$ <u>150.00</u>	\$ <u>150.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address <u>29536 Bonnie, Warren, MI 48093</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 3 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Jay Shah 660 Woodward, Suite 2430 Detroit, MI 48226		4. Date of Receipt <u>09/19/07</u> \$ <u>600.00</u>	\$ <u>600.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>Vice-President</u> Employer <u>Somat Engineering</u> Business Address <u>660 Woodward, Suite 2430, Detroit, MI 48226</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	
3. Contribution # 4 Is this contribution from a PAC? <input type="checkbox"/> YES Name & Address: Timothy D. Tomlinson 38272 Trillium Place Harrison Township, MI 48045		4. Date of Receipt <u>09/19/07</u> \$ <u>2500.00</u>	\$ <u>2500.00</u>
5. If over \$100.00 cumulative, please provide: Occupation <u>attorney</u> Employer <u>York, Dolan & Tomlinson, PC</u> Business Address <u>42850 Garfield, Ste. 101, Clinton Township, MI 48038</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		Click Here for Memo Itemization Type	

Page Subtotal \$3,550.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS

SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/18/07

Name & Address:

Thomas Giancotti
5088 Skyline Lane
Washington, MI 48094

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation General Manager Employer Amexx Leasing

Business Address 3400 E. Lafayette, Detroit, MI 48207

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 08/30/07

Name & Address:

Joseph Lentine
29377 Hoover
Warren, MI 48093

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer JAL Property Investments

Business Address 29377 Hoover, Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Louis Stramaglia
1630 Baron Ct.
Rochester Hills, MI 48307

\$ 2500.00

\$ 2500.00

5. If over \$100.00 cumulative, please provide:

Occupation Owner Employer Volpe-Vito

Business Address 3000 Auburn Road, Shelby Township, MI 48317

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Denise L. Williams
29410 Grandview Street
Harrison Twp., MI 48045

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

Occupation Personnel Manager Employer City of Warren

Business Address One City Square, Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

[Click Here for Memo Itemization Type](#)

Page Subtotal

\$2,950.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number _____

2. Committee Name _____

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/05/07

Name & Address:

John L. Veraldi
6163 Dana Rose Street
Washington, MI 48094

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/12/07

Name & Address:

Ronald A. Marino
2501 Pebble Beach Drive
Oakland Township, MI 48363

\$ 300.00

\$ 300.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation President Employer Glencorp

Business Address 47641 Ryan Road, Shelby Township, MI 48317

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 08/31/07

Name & Address:

Floyd Underwood
22420 Ardmore Park Drive
St. Clair Shores, MI 48081

\$ 300.00

\$ 300.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation contractor Employer Woodlane Construction

Business Address 27124 Osmon Street, Madison Heights, MI 48071

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Henry Bowman
8802 Chicago
Warren, MI 48093

\$ 150.00

\$ 150.00

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation Parks & Rec Director Employer City of Warren

Business Address One City Square, Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

\$ 900.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

Enter this total
on line 3 of
Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 2A

INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802

2. Committee Name Macomb Business United

Please enter contributor's name and address. If contribution is from an individual, enter last name, first name, and middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (Both are commonly called PACs).

6. Amount

7. Cumulative for
Calendar Year for Each
Contributor (Through
date of receipt)

3. Contribution # 1

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/18/07

Name & Address:

Gregory Doyal
408 Roland Drive
Grosse Pointe Farms, MI 48236

\$ 150.00

\$ 150.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation _____ Employer _____

Business Address 408 Roland Drive, Grosse Pointe Farms, MI 48236

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 2

Is this contribution from a PAC? ☐ YES

4. Date of Receipt 09/19/07

Name & Address:

Cecil D. St. Pierre, Jr.
23595 Sabrina Ct.
Warren, MI 48093

\$ 1000.00

\$ 1000.00

5. If over \$100.00 cumulative, please provide:

[Click Here for Memo Itemization Type](#)

Occupation Attorney Employer Law Offices of Cecil D. St. Pierre, Jr., P.C.

Business Address 2 Crocker Boulevard, Ste. 202, Mt. Clemens, MI 48043

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution # 3

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

3. Contribution # 4

Is this contribution from a PAC? ☐ YES

4. Date of Receipt _____

Name & Address:

\$ _____

\$ _____

[Click Here for Memo Itemization Type](#)

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

\$ 1,150.00

Grand Total of All Schedules 2A
(Complete on last page of Schedule)

\$ 29,500.00

Enter this total
on line 3 of
Summary
Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

Clear Form

ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802
2. Committee Name Macomb Business United

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Triangle Printing 30520 Gratiot Roseville, MI 48066 4. Purpose: <u>Typesetting</u> <input type="checkbox"/> Fund Raiser	5. _____ Name of Candidate Office Sought & District # or Jurisdiction County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>09/27/07</u> Date	<u>\$ 1,802.00</u>	<u>\$ 1,802.00</u> Click Here for Memo Itemization Type
Expenditure #2 Name & Address: CTE Jerry Weinzierl 11573 Arden Ave Warren, MI 48093 4. Purpose: <u>Contribution</u> <input type="checkbox"/> Fund Raiser	5. <u>Jerry Weinzierl</u> Name of Candidate <u>Warren City Council</u> Office Sought & District # or Jurisdiction <u>Macomb</u> County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>08/01/07</u> Date	<u>\$ 1,000.00</u>	<u>\$ 1,000.00</u> Click Here for Memo Itemization Type
Expenditure #3 Name & Address: CTE Alan Casmere 28836 Panama Warren, MI 48092 4. Purpose: <u>Contribution</u> <input type="checkbox"/> Fund Raiser	5. <u>Alan Casmere</u> Name of Candidate <u>Warren City Council</u> Office Sought & District # or Jurisdiction <u>Macomb</u> County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>08/06/07</u> Date	<u>\$ 1,000.00</u>	<u>\$ 1,000.00</u> Click Here for Memo Itemization Type
Expenditure #4 Name & Address: CTE Phillip Camarda 28686 Walker Warren, MI 48093 4. Purpose: <u>Contribution</u> <input type="checkbox"/> Fund Raiser	5. <u>Phillip Camarda</u> Name of Candidate <u>Warren City Council</u> Office Sought & District # or Jurisdiction <u>Macomb</u> County <input type="checkbox"/> Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	<u>10/06/07</u> Date	<u>\$ 500.00</u>	<u>\$ 500.00</u> Click Here for Memo Itemization Type

Subtotal this page **\$4,302.00**

Grand Total of all Schedules 2B
(Complete on last page of Schedule)

Enter this total
on line 9 of the
Summary Page



ITEMIZED DIRECT EXPENDITURES
SCHEDULE 2B
INDEPENDENT OR POLITICAL COMMITTEE

1. Committee I.D. Number 137802
Macomb Business United

2. Committee Name _____

3. Name and address of person or vendor to whom the expenditure was made	5. Candidate or Ballot Question Information	6. Date	7. Amount	8. Cumulative for Election or Election Cycle
Expenditure #1 Name & Address: Lithographics 19361 E. 10 Mile Road Roseville, MI 48066	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	10/04/07 Date	\$ 2,432.00 \$ _____	\$ _____
4. Purpose: <u>Printing</u> <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type			
Expenditure #2 Name & Address: Lithographics 19361 E. 10 Mile Road Roseville, MI 48066	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	10/10/07 Date	\$ 2,925.00 \$ _____	\$ 5,357.00 \$ _____
4. Purpose: <u>Printing</u> <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type			
Expenditure #3 Name & Address: Manhattan Mailers 51132 Milano Drive Macomb, MI 48042	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	10/11/07 Date	\$ 4,030.42 \$ _____	\$ 4,030.42 \$ _____
4. Purpose: <u>mailing & postage</u> <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type			
Expenditure #4 Name & Address: Picano's 3775 Rochester Troy, MI 48083	5. _____ Name of Candidate _____ Office Sought & District # or Jurisdiction _____ County _____ Ballot Proposal <input type="checkbox"/> Check box if expenditure is payment of Debt or Obligation reported on previous statement	09/19/07 Date	\$ 3,437.00 \$ _____	\$ 3,437.00 \$ _____
4. Purpose: <u>fundraiser expense</u> <input checked="" type="checkbox"/> Fund Raiser	Click Here for Memo Itemization Type			

Subtotal this page	\$12,824.42
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Grand Total of all Schedules 2B
(Complete on last page of Schedule)

17,126.42

Enter this total
on line 9 of the
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B - G**

1. Committee I.D. Number **137802**

POLITICAL PARTY, POLITICAL OR INDEPENDENT COMMITTEES

2. Committee Name **Macomb Business United**

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY.

Describe the specific Get-Out-The -Vote activity in Item 4f. **ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED**

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure #1 Name & Address: Sam's Club 31020 John R Madison Heights MI 48071 For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Free Spaghetti Dinner for AV's Cumulative for Candidate or Ballot Proposal \$ _____	10/03/07 Date	\$ 606.60 Click here for Memo Itemization Type
Expenditure #2 Name & Address: Geloso's Bakery 15150 14 Mile Road Warren, MI 48093 For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Free Spaghetti Dinner for AV's Cumulative for Candidate or Ballot Proposal \$ _____	10/03/07 Date	\$ 225.00 Click here for Memo Itemization Type
Expenditure #3 Name & Address: Gordon Food Service 7835 Convention Blvd. Warren, MI 48092 For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Free Spaghetti Dinner for AV's Cumulative for Candidate or Ballot Proposal \$ _____	10/03/07 Date	\$ 88.82 Click here for Memo Itemization Type

Subtotal this page **\$920.42**

Grand Total of all Schedules B-G
(Complete on last page of Schedule)
Enter this total on Line Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**EXPENDITURES FOR GET-OUT-THE VOTE ACTIVITIES
SCHEDULE B - G**

1. Committee I.D. Number **137802**

POLITICAL PARTY, POLITICAL OR INDEPENDENT COMMITTEES

2. Committee Name **Macomb Business United**

USE THIS FORM TO REPORT EXPENDITURES MADE FOR ELECTION DAY BUSING OF VOTERS TO THE POLLS, FOR SLATE CARDS, CHALLENGERS, POLL WATCHERS, POLL WORKERS, AND GET-OUT-THE VOTE ACTIVITY.

Describe the specific Get-Out-The -Vote activity in Item 4f. **ALL EXPENDITURES ARE REQUIRED TO BE ITEMIZED**

3. Name and address of person or vendor to whom the expenditure was made	4. Type of Activity	5. Date	6. Amount
Expenditure #1 Name & Address: St. Josephat's 26440 Ryan Warren, MI 48092 For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Free Spaghetti Dinner for AV's Cumulative for Candidate or Ballot Proposal \$ _____	10/03/07 Date Click here for Memo Itemization Type	\$ 3,500.00
Expenditure #2 Name & Address: Vintage House 31816 Utica Fraser, MI 48026 For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input checked="" type="checkbox"/> Get-Out-The Vote Activity (Specify): Free Spaghetti Dinner for AV's Cumulative for Candidate or Ballot Proposal \$ _____	10/03/07 Date Click here for Memo Itemization Type	\$ 535.00
Expenditure #3 Name & Address: For Activity Type b - f, check one: <input type="checkbox"/> In-Kind <input type="checkbox"/> Independent If in support of, or in opposition to, a ballot proposal or candidate, check one: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Check box if expenditure is payment on debt or obligation reported on previous statement	a. <input type="checkbox"/> Election Day Busing of Voters To The Polls b. <input type="checkbox"/> Slate Cards c. <input type="checkbox"/> Challengers d. <input type="checkbox"/> Poll Watchers e. <input type="checkbox"/> Poll Workers f. <input type="checkbox"/> Get-Out-The Vote Activity (Specify): Cumulative for Candidate or Ballot Proposal \$ _____	 Date Click here for Memo Itemization Type	\$ _____



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 2F
INDEPENDENT OR POLITICAL COMMITTEE**

1. Committee I.D. Number 137802
2. Committee Name Macomb Business United

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held <u>09/19/07</u>	4. Number of Individuals Attending or Participating (whichever is greater)	5. Type of Fund Raising Activity Dinner	6. Address and Name (If any) of the place where the activity was held Picano's 3775 Rochester Road Troy, MI 48083 <input type="checkbox"/> Private Residence
---	--	---	---

7. Total Contributions _____

8. Other Receipts _____

9. Gross Receipts (Add lines 7 and 8) _____

10. Total Cost of Event \$3,437.00

*Includes In-Kind Contributions and All
Expenditures Made For the Event

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Direct Contributions Schedule (2A), Itemized In-Kind Contributions Schedule (2-IK), Itemized Expenditures Schedule (2B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.